

**Wisconsin Operator Training Designation**  
(use this page to designate operators for a Single facility/site)

Customer # _____
Customer Name: _____
Address: _____
City, State Zip: _____
County _____

Facility ID: _____
Facility Name: _____
Address: _____
City: _____ Zip: _____
County _____

Comm 10.820 Designation of Class A, Class B and Class C operators. (1) General. Beginning no later than January 1, 2012, each new or existing underground storage tank system or group of underground storage tank systems at a facility shall have a class A operator, a class B operator and a Class C operator, as designated by the owner or operator, and as accredited in accordance with this subchapter.....

<b>Class A Designated Operator</b>	
<b>Name:</b> _____ First name, Middle initial, Last name	
<b>Date of Birth:</b> _____ / _____ / _____	
<b>Training Level Completed:</b> <input type="checkbox"/> A (only) <input type="checkbox"/> A/B (both)	
<b>Certification Number (if known):</b> _____	
<b>WISCONSIN UST OPERATOR TEST/TRAINING METHOD</b>	
<input type="checkbox"/> Antea Group, WI A/B Online	
<input type="checkbox"/> Barker Lemar, WI A/B Classroom	
<input type="checkbox"/> DSPS, WI Specialty Tank A/B Online	
<input type="checkbox"/> ICC, WI Specific A Test (PearsonVue)	
<input type="checkbox"/> ICC, WI Specific B Test (PearsonVue)	
<input type="checkbox"/> Practical American Safety Solutions, WI A/B Online	
<input type="checkbox"/> Petroleum Testers - Robert Lucht, WI A/B Classroom	
<input type="checkbox"/> UST Training by Petroleum Training Solutions, WI A/B Webinar	
<input type="checkbox"/> WI Continuing Ed Service, WI A/B Operator Classroom	
<input type="checkbox"/> Williams & Co., WI A/B Operator Classroom	
<input type="checkbox"/> Other _____	
<b>Signature</b> _____ <b>Date</b> _____	
<b>Phone</b> (____) _____ - _____	

<b>Class B Designated Operator</b>	
<b>Name:</b> _____ First name, Middle initial, Last name	
<b>Date of Birth:</b> _____ / _____ / _____	
<b>Training Level Completed:</b> <input type="checkbox"/> B (only) <input type="checkbox"/> A/B (both)	
<b>Certification Number (if known):</b> _____	
<b>WISCONSIN UST OPERATOR TEST/TRAINING METHOD</b>	
<input type="checkbox"/> Antea Group, WI A/B Online	
<input type="checkbox"/> Barker Lemar, WI A/B Classroom	
<input type="checkbox"/> DSPS, WI Specialty Tank A/B Online	
<input type="checkbox"/> ICC, WI Specific A Test (PearsonVue)	
<input type="checkbox"/> ICC, WI Specific B Test (PearsonVue)	
<input type="checkbox"/> Practical American Safety Solutions WI A/B Online	
<input type="checkbox"/> Petroleum Testers - Robert Lucht, WI A/B Classroom	
<input type="checkbox"/> UST Training by Petroleum Training Solutions, WI A/B Webinar	
<input type="checkbox"/> WI Continuing Ed Service, WI A/B Operator Classroom	
<input type="checkbox"/> Williams & Co., WI A/B Operator Classroom	
<input type="checkbox"/> Other _____	
<b>Signature</b> _____ <b>Date</b> _____	
<b>Phone</b> (____) _____ - _____	

**Use this page to list operators for a single facility. If you want to list additional A and/or B operators for this facility, duplicate this page as needed.**

**Use reverse side to list operators for multiple facilities, duplicate page as needed.**

Return to: Petroleum Products and Tanks Bureau  
Wisconsin Department of Safety and Professional Services  
P O Box 7837  
Madison, WI 53707-7837  
Questions: [Mike.fehrenbach@wisconsin.gov](mailto:Mike.fehrenbach@wisconsin.gov)

# Wisconsin Operator Training Designation

(use this page to designate operators for a Multiple facility/sites)

<b>Class A Designated Operator</b>	
<b>Name:</b> _____ First name, Middle initial, Last name	
<b>Date of Birth:</b> _____ / _____ / _____	
<b>Training Level Completed:</b> <input type="checkbox"/> A (only) <input type="checkbox"/> A/B (both)	
<b>Certification Number (if known):</b> _____	
<b>WISCONSIN UST OPERATOR TEST/TRAINING METHOD</b>	
<input type="checkbox"/> Antea Group, WI A/B Online <input type="checkbox"/> Barker Lemar, WI A/B Classroom <input type="checkbox"/> DSPS, WI Specialty Tank A/B Online <input type="checkbox"/> ICC, WI Specific A Test (PearsonVue) <input type="checkbox"/> ICC, WI Specific B Test (PearsonVue) <input type="checkbox"/> Practical American Safety Solutions, WI A/B Online <input type="checkbox"/> Petroleum Testers - Robert Lucht, WI A/B Classroom <input type="checkbox"/> UST Training by Petroleum Training Solutions, WI A/B Webinar <input type="checkbox"/> WI Continuing Ed Service, WI A/B Operator Classroom <input type="checkbox"/> Williams & Co., WI A/B Operator Classroom <input type="checkbox"/> Other _____	
<b>Signature</b> _____ <b>Date</b> _____	
<b>Phone</b> (____) _____ - _____	

<b>Class B Designated Operator</b>	
<b>Name:</b> _____ First name, Middle initial, Last name	
<b>Date of Birth:</b> _____ / _____ / _____	
<b>Training Level Completed:</b> <input type="checkbox"/> B (only) <input type="checkbox"/> A/B (both)	
<b>Certification Number (if known):</b> _____	
<b>WISCONSIN UST OPERATOR TEST/TRAINING METHOD</b>	
<input type="checkbox"/> Antea Group, WI A/B Online <input type="checkbox"/> Barker Lemar, WI A/B Classroom <input type="checkbox"/> DSPS, WI Specialty Tank A/B Online <input type="checkbox"/> ICC, WI Specific A Test (PearsonVue) <input type="checkbox"/> ICC, WI Specific B Test (PearsonVue) <input type="checkbox"/> Practical American Safety Solutions, WI A/B Online <input type="checkbox"/> Petroleum Testers - Robert Lucht, WI A/B Classroom <input type="checkbox"/> UST Training by Petroleum Training Solutions, WI A/B Webinar <input type="checkbox"/> WI Continuing Ed Service, WI A/B Operator Classroom <input type="checkbox"/> Williams & Co., WI A/B Operator Classroom <input type="checkbox"/> Other _____	
<b>Signature</b> _____ <b>Date</b> _____	
<b>Phone</b> (____) _____ - _____	

<u><b>Facility ID#</b></u>	<u><b>Facility Name</b></u>	<u><b>Address</b></u>	<u><b>City</b></u>	<u><b>Zip code</b></u>
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(The Class A and B operators listed above are designated as operators for these facilities. Duplicate this page as needed).


Return to: Petroleum Products and Tanks Bureau  
 Wisconsin Department of Safety and Professional Services  
 P O Box 7837  
 Madison, WI 53707-7837

Questions: [Mike.fehrenbach@wisconsin.gov](mailto:Mike.fehrenbach@wisconsin.gov)